

IN UNITED STATES <input type="checkbox"/> MAGISTRATE <input type="checkbox"/> DISTRICT <input type="checkbox"/> APPEALS COURT <input type="checkbox"/> OTHER PANEL (Specify below)		LOCATION NUMBER
IN THE CASE OF		
U.S.A.	V.S. Sean Sacco	
PERSON REPRESENTED (Show your full name)		DOCKET NUMBERS
Sean Sacco		Magistrate
CHARGE/OFFENSE (describe if applicable & check box →) <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor		District Court
Conspiracy, Mail Fraud		04-10231-MLW
		Court of Appeals

1 ☐ Defendant—Adult

2 ☐ Defendant—Juvenile

3 ☐ Appellant

4 ☐ Probation Violator

5 ☐ Parole Violator

6 ☐ Habeas Petitioner

7 ☐ 2255 Petitioner

8 ☐ Material Witness

9 ☐ Other

ASSETS	EMPLOYMENT	Are you now employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Am Self-Employed	
		Name and address of employer: E.A. Colangeli Const. Co. Inc.	
		IF YES, how much do you earn per month? \$ 2,010.00	IF NO, give month and year of last employment
			How much did you earn per month? \$
		If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		IF YES, how much does your Spouse earn per month? \$	
		If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$	
OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES		
CASH	Have you any cash on hand or money in savings or checking accounts? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ 1,000.00		
PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	IF YES, GIVE THE VALUE AND DESCRIBE IT		
	VALUE	DESCRIPTION	
	1,500.00	1995 Nissan Maxima	

DEPENDENTS	MARITAL STATUS	Total No. of Dependents	List persons you actually support and your relationship to them	
	<input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	0		
OBLIGATIONS & DEBTS	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS INCLUDING BANKS, LOAN COMPANIES, CREDIT CARD ACCOUNTS, ETC.)	Creditors	Total Debt	Monthly Paymt.
	APARTMENT OR HOME: Apartment		\$	\$ 500.00
	Cell phone		\$	\$ 50.00
	Utilities, Electric cable Gas etc...		\$	\$ 250.00
	Credit Cards		\$ 600	\$ 200.00

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

11-8-4
